



Form **990-T**

# Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0047

## 2019

For calendar year 2019 or other tax year beginning \_\_\_\_\_, and ending 1912

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information  
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Department of the Treasury  
Internal Revenue Service

Open to Public Inspection for  
501(c)(3) Organizations Only

A <input type="checkbox"/> Check box if address changed	Print or Type	Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions )	D Employer identification number (Employers' trust, see instructions)
		<b>LIFESPACE COMMUNITIES, INC.</b>	<b>42-1068850</b>
		Number, street, and room or suite no. If a P.O. box, see instructions <b>4201 CORPORATE DRIVE</b>	E Unrelated business activity code (See instructions)

B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	C Book value of all assets at end of year <b>1,074,258,846.</b>	F Group exemption number (See instructions) ▶	G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust
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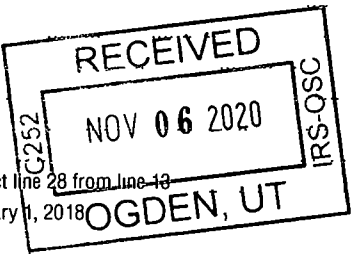
H Enter the number of the organization's unrelated trades or businesses ▶ Describe the only (or first) unrelated trade or business here ▶ **NO ACTIVITY - REFUND CLAIM** If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation ▶

J The books are in care of ▶ **TIM NEVINS** Telephone number ▶ **515-288-5805**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
1c	Balance ▶			
2	Cost of goods sold (Schedule A, line 7)			
3	Gross profit Subtract line 2 from line 1c			
4a	Capital gain net income (attach Schedule D)			
4b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
4c	Capital loss deduction for trusts			
5	Income (loss) from a partnership or an S corporation (attach statement)			
6	Rent income (Schedule C)			
7	Unrelated debt-financed income (Schedule E)			
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10	Exploited exempt activity income (Schedule I)			
11	Advertising income (Schedule J)			
12	Other income (See instructions; attach schedule)			
13	Total. Combine lines 3 through 12	0.		

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income)			
14	Compensation of officers, directors, and trustees (Schedule K)		14
15	Salaries and wages		15
16	Repairs and maintenance		16
17	Bad debts		17
18	Interest (attach schedule) (see instructions)		18
19	Taxes and licenses		19
20	Depreciation (attach Form 4562)		20
21a	Less depreciation claimed on Schedule A and elsewhere on return		21b
22	Depletion		22
23	Contributions to deferred compensation plans		23
24	Employee benefit programs		24
25	Excess exempt expenses (Schedule I)		25
26	Excess readership costs (Schedule J)		26
27	Other deductions (attach schedule)		27
28	Total deductions Add lines 14 through 27		28 0.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13		29 0.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		30 0.
31	Unrelated business taxable income Subtract line 30 from line 29		31 0.



SCANNED JUL 06 2021

ENVELOPE OCT 30 2020 POSTMARK DATE

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, Amount. Includes lines 32-39. Total unrelated business taxable income is 0.

Part IV Tax Computation

Table with 3 columns: Line number, Description, Amount. Includes lines 40-45. Total tax computation is 0.

Part V Tax and Payments

Table with 3 columns: Line number, Description, Amount. Includes lines 46a-56. Total tax and payments is 2,229.

Part VI Statements Regarding Certain Activities and Other Information

Table with 3 columns: Question, Yes, No. Includes questions 57-59 regarding foreign accounts and distributions.

Sign Here: Under penalties of perjury, I declare that I have examined this return... Signature of officer: [Signature] Date: 10/26/20 Title: SENIOR VICE PRESIDENT & CFO

Paid Preparer Use Only: Print/Type preparer's name: JED CHENEY, Preparer's signature: [Signature], Date: 10-21-2020, Firm's name: CLIFTONLARSONALLEN LLP, Firm's EIN: 41-0746749